## STATE OF SOUTH DAKOTA

STATE OF SOUTH DAKOTA

DEC 15 2016

Statement of Legal Newspaper Ownership and Circulation
S.D. SEC. OF STATE

Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077		
1. TITLE OF NEWSPAPER The Arman Chronicle		2. DATE
3. FREQUENCY OF ISSUE 3A. NO. OF ISSUES PUBLISH	HED ANNUALLY 3B. AN	NNUAL SUBSCRIPTION
Eveckly 52		18 30 a \$ 35 00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code)		
(Not printers)		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE		
PUBLISHER (Not printers) Daylas County Publishing		
10 Box 129 Arman, 50 57313-6129 Douglas Carry		
6. FULL NAME OF PUBLISHER: GPM Kaye Cotsons + Eric E. Olson		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and		
addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name		
and address, as well as that of each individual must be given.		
FULL NAME COMPLETE MAILING ADDRESS		
Back Perer		
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1		
PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, M	ORTGAGES OR OTHER SEC	CURITIES (If there are none, so
state. If more space is needed, list on back of this form.		
lone	9	
	AVERAGE NO. COPIES EACH	ACTUAL NO. COPIES
9. EXTENT AND NATURE OF CIRCULATION	ISSUED PRECEDING 12	ISSUED NEAREST TO FILING DATE
	MONTHS	NEAREST TO FILING DATE
A.TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	680	680
<ul><li>B.PAID AND/OR REQUESTED CIRCULATION</li><li>1. Sales through dealers and carriers, street vendors,</li></ul>	9/ -	6
and counter sales.	80	80
2. Mail Subscription	0.5	11515
(Paid and or requested)	2.02	983
3. Paid Electronic Copies	0	
C.TOTAL PAID AND/OR REQUESTED CIRCULATION	-0-	-1-
(Sum of 9B1, 9B2 and 9B3.)	585	565
D.FREE DISTRIBUTION	21	2
1. BY MAIL, CARRIER OR OTHER MEANS	31	1
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	
	1 11	500
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	6,14	592
F. COPIES NOT DISTRIBUTED  1. Office use, left over, unaccounted, spoiled after printing	64	88
2. Return from News Agents	^	
G.TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	1 00	1 60
	680	680
Statement must be signed by Publisher, Business Manag		nce of a Notary Public
I swear that the statements made by me are true, co	orrect, and complete:	
Hill Oa.	Pres. /1/ Pr	·<
(Signature)	(Title)	
		1 5 - 01 16 -
State of South Dakota ) Sworn to before me this 21 day of Sept., 2016		
· §	J-10.0/-	
County of Dayslas ) Notary Public		
(Seal) My commission expires: Aug. 2070		
(New)		1

Douglas County Publishing
P.O. Box 45
Corsica, SD 57328-0045
Douglas county

Gerri K. 01500 Pres. / V. Pres. P.O. Box 208 Worsica, 50 57328

Eric E. Olson Sec./Treas.

P.O. Box 208

corsica, SD 57328